

**PCT****REQUEST**

The undersigned requests that the present international application be processed according to the Patent Cooperation Treaty.

International Application No.

International Filing Date

Name of receiving Office and "PCT International Application"

Applicant's or agent's file reference  
(if desired) (12 characters maximum) B.1213 PCT**Box No. I TITLE OF INVENTION**

NEEDLELESS INJECTION DEVICE COMPRISING A PYROTECHNIC CARTRIDGE, AND METHOD OF ASSEMBLING SUCH A DEVICE

**Box No. II APPLICANT** This person is also inventor

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

CROSSJECT  
12 Quai Henri IV  
75004 PARIS  
FRANCE

Telephone No.

Facsimile No.

Teleprinter No.

Applicant's registration No. with the Office

State (that is, country) of nationality:

FRANCE

State (that is, country) of residence:

FRANCE

This person is applicant for the purposes of:  all designated States  all designated States except the United States of America  the United States of America only  the States indicated in the Supplemental Box

**Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)**

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

ALEXANDRE Patrick  
14 avenue de la Libération  
70100 GRAY  
FRANCE

This person is:

- applicant only
- applicant and inventor
- inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:

FRANCE

State (that is, country) of residence:

FRANCE

This person is applicant for the purposes of:  all designated States  all designated States except the United States of America  the United States of America only  the States indicated in the Supplemental Box

 Further applicants and/or (further) inventors are indicated on a continuation sheet.**Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE**

The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as:

 agent common representative

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

Telephone No.  
33 01 48 04 66 66

SNPE  
SERVICE PROPRIETE INDUSTRIELLE  
12 Quai Henri IV  
75004 PARIS  
FRANCE

Facsimile No.  
33 01 48 04 69 66  
Teleprinter No.

Agent's registration No. with the Office

Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

## Continuation of Box No. III

## FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S)

*If none of the following sub-boxes is used, this sheet should not be included in the request.*

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

BAUD Georges  
18 rue des Ormes  
83260 LA CRAU  
FRANCE

This person is:

- applicant only
- applicant and inventor
- inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:

FRANCE

State (that is, country) of residence:

FRANCE

This person is applicant for  all designated States  all designated States except the United States of America  the United States of America only  the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

BROUQUIERES Bernard  
4 rue Sandin  
83100 TOULON  
FRANCE

This person is:

- applicant only
- applicant and inventor
- inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:

FRANCE

State (that is, country) of residence:

FRANCE

This person is applicant for  all designated States  all designated States except the United States of America  the United States of America only  the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

GAUTIER Philippe  
8 rue des Glycines  
91220 LE PLESSIS PATE  
FRANCE

This person is:

- applicant only
- applicant and inventor
- inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:

FRANCE

State (that is, country) of residence:

FRANCE

This person is applicant for  all designated States  all designated States except the United States of America  the United States of America only  the States indicated in the Supplemental Box

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.)

This person is:

- applicant only
- applicant and inventor
- inventor only (If this check-box is marked, do not fill in below.)

Applicant's registration No. with the Office

State (that is, country) of nationality:

State (that is, country) of residence:

This person is applicant for  all designated States  all designated States except the United States of America  the United States of America only  the States indicated in the Supplemental Box

Further applicants and/or (further) inventors are indicated on another continuation sheet.

**Box No. VI PRIORITY CLAIM**

The priority of the following earlier application(s) is hereby claimed:

Filing date of earlier application (day/month/year)	Number of earlier application	Where earlier application is:		
		national application: country or Member of WTO	regional application: * regional Office	international application: receiving Office
item (1) 21/03/03	0303497	FRANCE		
item (2)				
item (3)				
item (4)				
item (5)				

Further priority claims are indicated in the Supplemental Box.

The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) (*only if the earlier application was filed with the Office which for the purposes of this international application is the receiving Office*) identified above as:

all items     item (1)     item (2)     item (3)     item (4)     item (5)     other, see  
Supplemental Box

\*Where the earlier application is an ARIPO application, indicate at least one country party to the Paris Convention for the Protection of Industrial Property or one Member of the World Trade Organization for which that earlier application was filed (Rule 4.10(b)(ii)): .....

**Box No. VII INTERNATIONAL SEARCHING AUTHORITY**

**Choice of International Searching Authority (ISA)** (*if two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used*):

ISA /EP.....

**Request to use results of earlier search; reference to that search** (*if an earlier search has been carried out by or requested from the International Searching Authority*):

Date (day/month/year)	Number	Country (or regional Office)
17/11/2003	FA633764	FRANCE

**Box No. VIII DECLARATIONS**

The following declarations are contained in Boxes Nos. VIII (i) to (v) (*mark the applicable check-boxes below and indicate in the right column the number of each type of declaration*):

Number of  
declarations

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Box No. VIII (i)   | Declaration as to the identify of the inventor   | : |
| <input type="checkbox"/> Box No. VIII (ii)  | Declaration as to the applicant's entitlement, as at the international filing date, to apply for and be granted a patent             | : |
| <input type="checkbox"/> Box No. VIII (iii) | Declaration as to the applicant's entitlement, as at the international filing date, to claim the priority of the earlier application | : |
| <input type="checkbox"/> Box No. VIII (iv)  | Declaration of inventorship (only for the purposes of the designation of the United States of America)                               | : |
| <input type="checkbox"/> Box No. VIII (v)   | Declaration as to non-prejudicial disclosures or exceptions to lack of novelty:  | : |

**Box No. VIII (iv) DECLARATION: INVENTORSHIP (only for the purposes of the designation of the United States of America)**

*The declaration must conform to the following standardized wording provided for in Section 214; see Notes to Boxes Nos. VIII, VIII (i) to (v) (in general) and the specific Notes to Box No. VIII (iv). If this Box is not used, this sheet should not be included in the request.*

**Declaration of inventorship (Rules 4.17(iv) and 51bis.1(a)(iv))  
for the purposes of the designation of the United States of America:**

I hereby declare that I believe I am the original, first and sole (if only one inventor is listed below) or joint (if more than one inventor is listed below) inventor of the subject matter which is claimed and for which a patent is sought.

This declaration is directed to the international application of which it forms a part (if filing declaration with application).

This declaration is directed to international application No. PCT/..... (if furnishing declaration pursuant to Rule 26ter).

I hereby declare that my residence, mailing address, and citizenship are as stated next to my name.

I hereby state that I have reviewed and understand the contents of the above-identified international application, including the claims of said application. I have identified in the request of said application, in compliance with PCT Rule 4.10, any claim to foreign priority, and I have identified below, under the heading "Prior Applications," by application number, country or Member of the World Trade Organization, day, month and year of filing, any application for a patent or inventor's certificate filed in a country other than the United States of America, including any PCT international application designating at least one country other than the United States of America, having a filing date before that of the application on which foreign priority is claimed.

Prior Applications FR 0303497 du 21/03/2003

I hereby acknowledge the duty to disclose information that is known by me to be material to patentability as defined by 37 C.F.R. § 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the PCT international filing date of the continuation-in-part application.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name: ALEXANDRE Patrick

Residence: 70100 Gray - FRANCE

(city and either US state, if applicable, or country)

Mailing Address: 14 avenue de la Libération

Citizenship: FRANCAISE

Inventor's Signature:

(if not contained in the request, or if declaration is corrected or added under Rule 26ter after the filing of the international application. The signature must be that of the inventor, not that of the agent)

Date:

(of signature which is not contained in the request, or of the declaration that is corrected or added under Rule 26ter after the filing of the international application)

Name: BROUQUIERES Bernard

Residence: 83100 TOULON - FRANCE

(city and either US state, if applicable, or country)

Mailing Address: 4 rue Sandin

Citizenship: FRANCAIS

Inventor's Signature:

(if not contained in the request, or if declaration is corrected or added under Rule 26ter after the filing of the international application. The signature must be that of the inventor, not that of the agent)

Date:

(of signature which is not contained in the request, or of the declaration that is corrected or added under Rule 26ter after the filing of the international application)

This declaration is continued on the following sheet, "Continuation of Box No. VIII (iv)".

**Continuation Box No. VIII (i) to (v)****DECLARATION**

If the space is insufficient in any of Boxes Nos. VIII (i) to (v) to furnish all the information, including in the case where more than two inventors are to be named in Box No. VIII (iv), in such case, write "Continuation of Box No. VIII ..." (indicate the item number of the Box) and furnish the information in the same manner as required for the purposes of the Box in which the space was insufficient. If additional space is needed in respect of two or more declarations, a separate continuation box must be used for each such declaration. If this Box is not used, this sheet should not be included in the request.

**Suite du cadre VIII.iv - DECLARATION: QUALITE D'INVENTUER**

(SEULEMENT AUX FINS DE LA Désignation des Etats-Unis d'Amérique)

Demande antérieure: FR 0303497 du 21/03/2003

Inventeur: BAUD Georges

83260 LA CRAU - FRANCE  
18 rue des Ormes

Nationalité: FRANCAISE

Date:

Signature de l'inventeur:

Inventeur: GAUTIER Phillippe

91220 LE PLESSIS PATE  
8 rue des Glycines

Nationalité: FRANCAISE

Date:

Signature de l'inventeur:

**Box No. IX CHECK LIST; LANGUAGE OF FILING**

This international application contains:		
(a) in paper form, the following number of sheets:		
request (including declaration sheets) : 6		
description (excluding sequence listings and/or tables related thereto) : 12		
claims : 3		
abstract : 1		
drawings : 2		
<b>Sub-total number of sheets : 24</b>		
sequence listings :		
tables related thereto :		
(for both, actual number of sheets if filed in paper form, whether or not also filed in computer readable form; see (c) below) :		
<b>Total number of sheets : 24</b>		
(b) <input type="checkbox"/> only in computer readable form (Section 801(a)(i))		
(i) <input type="checkbox"/> sequence listings		
(ii) <input type="checkbox"/> tables related thereto		
(c) <input type="checkbox"/> also in computer readable form (Section 801(a)(ii))		
(i) <input type="checkbox"/> sequence listings		
(ii) <input type="checkbox"/> tables related thereto		
Type and number of carriers (diskette, CD-ROM, CD-R or other) on which are contained the		
<input type="checkbox"/> sequence listings _____		
<input type="checkbox"/> tables related thereto _____		
(additional copies to be indicated under item 9(ii), in right column)		
Figure of the drawings which should accompany the abstract: 1		
This international application is accompanied by the following item(s) (mark the applicable check-boxes below and indicate in right column the number of each item):		
1. <input checked="" type="checkbox"/> fee calculation sheet	: 1	
2. <input checked="" type="checkbox"/> original separate power of attorney	: 2	
3. <input type="checkbox"/> original general power of attorney	: _____	
4. <input type="checkbox"/> copy of general power of attorney; reference number, if any: _____	: _____	
5. <input type="checkbox"/> statement explaining lack of signature	: _____	
6. <input type="checkbox"/> priority document(s) identified in Box No. VI as item(s): _____	: _____	
7. <input type="checkbox"/> translation of international application into (language): _____	: _____	
8. <input type="checkbox"/> separate indications concerning deposited microorganism or other biological material	: _____	
9. <input type="checkbox"/> sequence listing in computer readable form (indicate type and number of carriers)	: _____	
(i) <input type="checkbox"/> copy submitted for the purposes of international search under Rule 13ter only (and not as part of the international application)	: _____	
(ii) <input type="checkbox"/> (only where check-box (b)(i) or (c)(i) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Rule 13ter	: _____	
(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the sequence listings mentioned in left column	: _____	
10. <input type="checkbox"/> tables in computer readable form related to sequence listings (indicate type and number of carriers)	: _____	
(i) <input type="checkbox"/> copy submitted for the purposes of international search under Section 802(b-quater) only (and not as part of the international application)	: _____	
(ii) <input type="checkbox"/> (only where check-box (b)(ii) or (c)(ii) is marked in left column) additional copies including, where applicable, the copy for the purposes of international search under Section 802(b-quater)	: _____	
(iii) <input type="checkbox"/> together with relevant statement as to the identity of the copy or copies with the tables mentioned in left column	: _____	
11. <input checked="" type="checkbox"/> other (specify): _____	: _____	

**Box No. X SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE**  
*Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request).*

Carol WALIGORSKI, Chef du Service Propriété Industrielle de SNPE

For receiving Office use only

1. Date of actual receipt of the purported international application:		
3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:		
4. Date of timely receipt of the required corrections under PCT Article 11(2):		
5. International Searching Authority (if two or more are competent): ISA /	6. <input type="checkbox"/>	Transmittal of search copy delayed until search fee is paid
2. Drawings:		
<input type="checkbox"/> received:		
<input type="checkbox"/> not received:		

For International Bureau use only

Date of receipt of the record copy by the International Bureau: